- secondary = temporary and everyone has them
- primary = pathological
- syndromes of self pathology
  - ↳ understimulated self = feel boring; not getting good mirroring
  - ↳ overstimulated self = mirrored in isolation or a piece of themselves, not whole person
  - ↳ overburdened self = feels alone or unsupported; neglected, no idealized
  - ↳ fragmented self = little cohesion, not related to

* Recommended article in syllabus on Kohut
- optimal gratification: in the beginning you gratify the client's needs and then you interpret after some time when the relationship has developed

1/31/17

⇒ Mentalization (Peter Fonagy)
- ability to mentalize = process your own feelings as well as other people's motivations
  - ↳ "theory of mind"
- internal focus = focus on their own or others thoughts and (ex. introverts)
- external focus = physical, visible, behaviors to intuit mental states of others
  - ↳ ex. borderline personality disorder usually externally focused
- less able to mentalize when under severe stress
  - ↳ okay under mild-moderate stress
- early attachment trauma inhibits mentalization process which occurs through secure attachment

↳ mirroring by caregiver is crucial in developing mentalization

- treatment goal: is not insight
  ↳ focuses on reclaiming ability to mentalize by mirroring for the client; present-oriented

*video link in power point

⟹ Stress report

- children do not have capacity to deal with overwhelming stress (neglect/abuse)
- mild-moderate stress (MMS) helps brain growth
  ↳ too much inhibits integration and may result in dissociation
  ↳ therapy = MMS
- stress can be: positive = mild elevation in stress
  tolerable = buffered by support
  toxic = absence of protective relationships
- important to have some disappointment related to stress in order to innoculate stress
- stress: person moves on after stressor removed
- trauma: person gets stuck even after stressor is removed
- Hans Selye: General Adaptation Syndrome
  ↳ psychosomatic illnesses
- two phases of stress response
  ↳ immediate: survive first 10 min
    - SAM Axis = fight/flight/freeze (adrenaline)
    - burst of energy (blood to extremities)
  ↳ longer-term (chronic)
    - HPA axis
    - cortisol kicks in, continued fight/flight response
  - freeze = type of dissociation

- normal stress response = when cortisol reaches certain level, tells brain to shut off and return to baseline
- cortisol: stress hormone, steroid
  - ↳ chronic stress = stops ability to reduce inflammation
- behavioral health consequences
  - ↳ suboptimal stress response results in behavioral health problems
- more cortisol receptors = more effective stress response
- maltreatment = hypersensitive, hyperreactive
  - ↳ quick to react, short fuse, sees threat where there is none

*Putnam & Trickett study on sexual abuse

- consequences of child abuse/neglect
  - ↳ cannot articulate feelings
  - ↳ diminished left hemisphere development

⇒ Stress and memory

- experiences w/ high emotional valence
  - ↳ labeled important are remembered
- experiences w/ little emotional valence
  - ↳ labeled unimportant and not remembered
- experiences w/ a lot of emotionality (terror)
  - ↳ cannot be remembered; hypocampus is flooded w/ cortisol
- traumatic memories are not integrated
  - ↳ perceptual (senses) live separately and are dissociated
- every culture has different words/perceptions of stress
- acculturative stress = more significant than other stress
  - ↳ buffered by social support

⇒ Stress and coping

- people do the best they can in the service of organization
- coping resources = ex. self-esteem, self-confidence
  - ↳ psychological strategies
- types of coping
  - ↳ change stressor
  - ↳ change meaning of stressor
  - ↳ change emotions it arouses
    - therapists can intervene at any point
- when you can't change situation, you can use emotion-focused coping
- resilience: doesn't mean person is symptom free; can be learned
- expectancy theory → comes from social cognitive theory; people more likely to do a behavior that they will be successful at
- internal locus of control ≠ they have control over what happens to them
  - ↳ vs. external locus of control
  - ↳ can change how I react, feel
  - ↳ Attribution Theory
- Active vs avoidance coping
  - ↳ always looking at positive can become splitting
- Models of stress
  - ↳ linear model: Holmes & Rahe
    - 46 items given own weight
    - LCU → life change units
  - ↳ appraisal model: not stressor itself, but meaning assigned to stressor
    - affect goals
    - resources to cope

↳ diathesis (vulnerability): predisposition toward illness
  ↳ genetic or biological factor
  ↳ psychological factor
  ↳ ex. schizophrenia

- Polyvagal Theory (Porges, Steven)
  ↳ challenges two branches of nervous system; also vagal system that assists in stress management
  ↳ more advanced evolutionarily
  ↳ important in the engagement system
  ↳ "vagal break" = inhibits fight/flight
    • smart vagal
  ↳ early trauma compromised vagal system and older sympathetic system takes over
  ↳ is on parasympathetic branch that has been myelinated w/ secure attachment
  ↳ visibly ready for engagement = vagal system engaged
    • if not then perceiving you as threatening

- different types of stress
  ↳ ACEs
  ↳ caregiver stress (Gaugler, 2008)
    • primary vs. secondary cancer stress
    • Stress process model

* ADL = activities of daily living
  ↳ systemic stress (Parker-Ramirez 2008)

- weathering: chronic stress of racial discrimination

- Poverty and its responses
  ↳ stress of environment: even if income doesn't change, the environment makes a difference
  ↳ biology on high alert